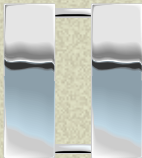




ADMINISTRATION REFERENCE GUIDE

NJP AUTHORITY

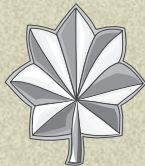
By - Company Grade Officers



- CONFINEMENT ON BREAD AND WATER FOR 3 DAYS
- CCU FOR 7 DAYS
- FORF OF 7 DAYS PAY
- EXTRA DUTIES X 14 DAYS
- RESTRICTION X 14 DAYS

(MCM, 2000, PART V, PAR 5b(2)(A))

By - Field Grade Officers



- CONFINEMENT ON BREAD AND WATER FOR 3 DAYS
- CCU FOR 30 DAYS
- FORF 1/2 MONTHS PAY PER MONTH FOR 2 MONTHS
- RED ONE PAY GRADE (CAN ONLY REDUCE SGT AND BELOW)
- EXTRA DUTIES FOR 45 DAYS
- RESTRICTION FOR 60 DAYS

(MCM, 2000, PART V, PAR 5b(2)(B))

Limitations on Punishments

- CPL AND ABOVE CANNOT RECEIVE CORRECTIONAL CUSTODY OR CONFINEMENT ON BREAD AND WATER
- EXTRA DUTIES CANNOT BE A KNOWN SAFETY HAZARD AND SHOULD ONLY LAST 2 HRS PER DAY
- REDUCED ONE RANK AT A TIME
- RESTRICTION MAY NOT EXCEED MAXIMUM EXTRA DUTIES IF BOTH ARE IMPOSED

(JAGMAN, SECTION 0111, pg 1-17)

Only Commanding Officers and designated OIC's, Authority cannot be delegated, "Acting" CO's will not sign "Acting"

DESERTER/ABSENTEE WANTED BY THE ARMED FORCES				1. DATE PREPARED (YYYYMMDD)		REPORT CONTROL SYMBOL DD-P&R(SA)1454	
2. TO (Local, State or Federal law enforcement authority as indicated by Military Deserter Information Point) See Distribution List				3. FROM (Organization or activity and place from which absent. If unauthorized absence occurs in transit, list old and new unit in Remarks) Commanding Officer 1st Supply Battalion, 1st FSSG Camp Pendleton, CA 92055		4. DISTRIBUTION CMC (POS-40) SRB PNOK	
5. ABSENTEE IDENTIFICATION							
a. NAME (Last, First, Middle Initial)			b. GRADE/RANK/RATE		c. SEX		
Brown, James R.			Corporal, E-4		M		
d. RACE (X one or more)				e. ETHNICITY (X one)			
<input type="checkbox"/> AMERICAN INDIAN/ALASKA NATIVE		<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		<input type="checkbox"/> HISPANIC OR LATINO			
<input type="checkbox"/> ASIAN		<input checked="" type="checkbox"/> WHITE		<input checked="" type="checkbox"/> NOT HISPANIC OR LATINO			
<input type="checkbox"/> BLACK OR AFRICAN AMERICAN		<input type="checkbox"/> DECLINE TO RESPOND		<input type="checkbox"/> DECLINE TO RESPOND			
f. PLACE OF BIRTH (City, State, Country)			g. DATE OF BIRTH (YYYYMMDD)		h. HEIGHT		i. WEIGHT
Sandusky, IA, USA			19750426		67"		170
j. EYE COLOR (X one)			k. HAIR COLOR (X one)				
<input type="checkbox"/> BLACK	<input type="checkbox"/> GREEN	<input type="checkbox"/> VIOLET	<input type="checkbox"/> AUBURN	<input checked="" type="checkbox"/> BROWN	<input type="checkbox"/> SILVER		
<input type="checkbox"/> BLUE	<input type="checkbox"/> GRAY		<input type="checkbox"/> BLACK	<input type="checkbox"/> GRAY	<input type="checkbox"/> WHITE		
<input type="checkbox"/> BROWN	<input checked="" type="checkbox"/> HAZEL		<input type="checkbox"/> BLOND	<input type="checkbox"/> RED	<input type="checkbox"/> BALD		
l. DIP CONTROL NUMBER		m. BRANCH OF SERVICE		n. SOCIAL SECURITY NO.		o. CITIZENSHIP	
Leave this blank		M		123-45-6789		US	
p. MARITAL STATUS		Single					
q. MILITARY OCCUPATION			s. PERMANENT RESIDENCE ADDRESS (Include ZIP Code)				
3043 Supply Administration			504 Fulton Ave Sandusky, IA 00112				
r. CIVILIAN OCCUPATION							
Grocery Store Clerk							
6. CURRENT ENLISTMENT				7. ENTRY INTO CURRENT PERIOD OF SERVICE		8. ATTACH PHOTOGRAPH (If available)	
a. DATE (YYYYMMDD)		b. PLACE (City and State)		a. DATE (YYYYMMDD)			
19950502		Wannapeck, IA		19950622		Same as 6b	
9. TIME OF ABSENCE				10. ADMINISTRATIVE DATE OF DESERTION (YYYYMMDD)			
a. DATE (YYYYMMDD)		b. HOUR		19990326			
19990224		06:31					
11. ESCAPED OR SENTENCED PRISONER (X as applicable)				12. DISCHARGE STATUS (X as applicable)			
<input type="checkbox"/> YES		IF "YES," SPECIFY CHARGE		a. DISCHARGED		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input checked="" type="checkbox"/> NO				b. SUSPENDED		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
13. OPERATOR'S LICENSE				14. VEHICLE LICENSE			
a. NUMBER	b. STATE	c. EXP. DATE (YYYYMMDD)		a. PLATE NO.	b. STATE	c. EXP. DATE (YYYYMMDD)	d. TYPE
7156460	IA	19990426		BATMAN	IA	19990601	unknown
15. VEHICLE							
a. VEHICLE IDENTIFICATION NUMBER	b. YEAR	c. MAKE	d. MODEL		e. STYLE	f. COLOR	
JMCS4521789	1989	Plymouth	Horizon		4 dr sedan	red	
16. RELATIVES AND/OR PERSONS KNOWN BY ABSENTEE (If more space is needed, continue in Remarks or on a separate page, making reference to this item number.)							
a. NAME (Last, First, Middle Initial)				b. ADDRESS (Include ZIP Code)			
(1) BROWN, Skip				504 Fulton Ave, Sandusky, IA 00112			
(2) BROWN, Julie				504 Fulton Ave, Sandusky, IA 00112			
(3)							
(4)							
(5)							

17. CERTIFICATION (See Notes)

The undersigned states: That he/she is a commissioned officer of the United States Marine Corps (Military Department), presently assigned as the Commanding Officer, 1st SupBn, 1st FSSG, CamPen (Unit from which the alleged deserter absented himself or herself), and in the performance of official duties imposed by Department of Defense Directive 1325.2 and MCO P5800.16 (Regulations of the Service concerned which implement DOD Directive 1325.2, e.g. Army Regulations 190-9 and 630-10), he/she has conducted an investigation into the status of BROWN, James R. Corporal (Name and rank of alleged deserter), a member of the United States Armed Forces serving on active duty with 1st SupBn, 1st FSSG, CamPen (Unit and Service from which the alleged deserter absented himself or herself), by questioning his/her unit cohorts; by examining and verifying the field service records of said service member which reflect his/her duty status; by requesting the member's next of kin to urge his/her voluntary return to military control if they are aware of his/her whereabouts; by inquiring to the fullest extent possible into the feasibility of other explanations for the member's absence, to include sickness, injury, hospitalization, and confinement by civil law enforcement officials; and officially ordered diversion from his/her unit of assignment by querying the member's losing unit (and en route temporary duty unit), the appropriate career management division, the servicing replacement organization, and the servicing Military Personnel and Transportation Assistance Office (and (See Note 1) N?A).

That based on the aforesaid investigation, the undersigned has personal knowledge that, on or 19990224 (Date - YYYYMMDD), BROWN, James R. Corporal (Name and rank of alleged deserter), did, without authority and with intent to remain away therefrom permanently, absent himself/herself from his/her unit/organization/place of duty, to wit: (See item 3 above) located at (See item 3) in violation of Section 885, Title 10, United States Code and he/she has remained continuously so absent until 19990326 (Date this statement is executed - YYYYMMDD). I state under penalty of perjury (under the laws of the United States of America (See Note 2) that the foregoing is true and correct. Executed on 19990326 (Date - YYYYMMDD).

NOTES:
1. For use only when a servicemember fails to report to a gaining unit of assignment during a permanent change of station.
2. For use only when statement is executed outside the United States, its territories, possessions and commonwealths.

18. COMMANDING OFFICER

a. TYPED NAME (Last, First, Middle Initial)	b. RANK	c. TITLE
STEVENS, Octavia R.	LtCol	Commanding Officer
d. ORGANIZATION AND INSTALLATION	e. SIGNATURE (All copies)	f. DATE SIGNED (YYYYMMDD)
1st SupBn, 1st FSSG, CamPen		19990326

19. REMARKS (List peculiar habits and traits of character; unusual mannerisms and speech; peculiarities in appearance; clothing worn; aliases (names); marks and scars; tattoos; facial characteristics; complexion, posture; build, other SSN's used by individual; or other data that

- CONFIRMED MARIJUANA USER
- ATTEMPTED SUICIDE
- 5 YEARS OF TAE KWON DO
- eel shaped scar over left eye

INFORMATION

1. AUTHORITY TO APPREHEND.

a. Any civil officer having the authority to apprehend offenders under the laws of the United States, or of a State, territory, commonwealth, possession, or the District of Columbia may summarily apprehend deserters from the Armed Forces of the United States and deliver them into custody of military officials.

Receipt of this form and a corresponding entry in the FBI's NCIC Wanted Person File, or oral notification from military officials or Federal law enforcement officials that the person has been declared a deserter and that his/her return to military control is desired, is authority for apprehension.

b. Civil authorities may apprehend absentees (AWOL's) when requested to do so by military authorities.

2. PAYMENT OF REWARD OR REIMBURSEMENT FOR EXPENSES.

a. Rewards. Receipt of this form, or oral or written notification from military authorities or Federal law enforcement officials, prior to apprehension of the individual, that the person is an absentee and that his/her return to military control is desired will be considered as an offer of reward. Persons or agency representatives (except salaried officers or employees of the Federal Government or servicemembers) apprehending or delivering absentees to military control are authorized:

(1) Payment for apprehension and detention of absentees until military authorities assume custody; or

(2) Payment for apprehension and delivery of absentees to a military installation.

b. Reimbursement for Expenses. Reimbursement may be made for actual expenses incurred when conditions for payment of a reward cannot be met. If two or more persons perform these services, payment will be made jointly or severally, but total payment to all may not exceed prescribed limitations.

c. Payment. Payment will be made to the person or agency representative actually making arrest and detention or delivery by the disbursing officer servicing the military facility to which the absentee is delivered and will be in full satisfaction of all expenses of

apprehending, keeping and delivering the absentee. Payment may be made whether the absentee surrenders or is apprehended. Payment will not be made for information leading to apprehension, nor for apprehension not followed by return to military control. Both reward and reimbursement may not be paid for the same apprehension and detention or delivery.

3. INDIVIDUAL CLAIMS HE/SHE IS NOT ABSENT WITHOUT AUTHORITY.

When a detained individual claims that he/she is not absent without leave and does not have the papers to prove his/her claim, the apprehending person or agency representative should communicate directly by the most rapid means available, with the nearest military installation manned by active duty personnel. When necessary, communicate directly (telephone or telegraph) with the Deserter Information Point of the military service concerned.

a. US Army: U.S Army Deserter Information Point
ATTN: ATZK-PMF-D
1481 Old Ironsides Avenue
Fort Knox, KY 40121

Telephone: Area Code (502) 626-3711/
3712/3713

b. US Navy: Navy Absentee Collection and
Information Center (NACIC)
2834 Greenbay Road
North Chicago, IL 60064

Telephone collect: Area Code (847) 688-2106
(or toll free: 1-800-423-7633)

c. US Marine Corps: Commandant, US Marine Corps
Code POS-40
2 Navy Annex
Washington, DC 20380-1775

Telephone collect: Area Code (703) 614-3248/3376

d. US Air Force: Headquarters AF Personnel Center
(DPWCM)
550 C Street West, Suite 14
Randolph AFB, TX 78150-4716

Telephone collect: Area Code (210) 566-3752
(or toll free: 1-800-531-5501)

REPORT OF RETURN OF ABSENTEE				REPORT CONTROL SYMBOL DD-P&R(SA)1454	
IMPORTANT NOTICE The absentee status of the individual named below has been terminated. Military records indicate that your agency was specifically furnished a copy of DD Form 553, "Deserter/ Absentee Wanted by the Armed Forces," soliciting your support. Request you clear your records of the DD Form 553 pertaining to this individual and the associated unauthorized absence indicated on this report. The Department of Defense and the Military Service law enforcement officials concerned gratefully acknowledge your participation and support of military apprehension programs.				1. DISTRIBUTION <i>(Same as DD Form 553 at time of absence)</i>	
2. NAME OF ABSENTEE <i>(Last, First, Middle Initial)</i> BROWN, James R					
3. SERVICE Marine Corps (M)		4. SOCIAL SECURITY NO. 123-45-6789		5. GRADE OR RATE Corporal, E-4	
6. FORMER ABSENTEE STATUS					
a. FORMER STATUS <i>(X one)</i>				b. DATE/HOUR ABSENCE BEGAN <i>(YYYYMMDD)</i> 19990224, 0631	
(1) ESCAPED OR SENTENCED PRISONER		(2) ABSENTEE			
<input checked="" type="checkbox"/>		(3) DESERTER <i>(Administrative)</i>			
c. ORGANIZATION AND INSTALLATION FROM WHICH ABSENT 1st Supply Battalion, 1st FSSG, Camp Pendleton, CA 92055					
7. CIRCUMSTANCES OF ABSENTEE'S RETURN					
a. MODE OF RETURN <i>(X one)</i>		b. AUTHORITIES TO WHOM ABSENTEE SURRENDERED OR BY WHOM APPREHENDED <i>(X one)</i>			
<input checked="" type="checkbox"/> (1) APPREHENDED		(1) MILITARY		<input checked="" type="checkbox"/> (2) CIVIL	(3) FBI
(2) SURRENDERED		(4) DIS			
(5) OTHER <i>(Specify)</i>					
c. PLACE OF INITIAL RETURN Oceanside Police Department 212 Beachway Dr, Oceanside, CA 92051				d. DATE/HOUR OF INITIAL RETURN <i>(YYYYMMDD)</i> 19990504, 0315	
e. REQUIRED ACTION <i>(X one)</i>					
<input checked="" type="checkbox"/> (1) RETURN TO MILITARY CONTROL		(2) RETAINED BY CIVIL AUTHORITIES		(3) CIVIL CHARGES	
(4) SAFEKEEPING					
f. MILITARY ORGANIZATION AND INSTALLATION OR CIVILIAN LOCATION 1st Supply Battalion, 1st FSSG, Camp Pendleton, CA 92055				g. DATE RETURNED TO MILITARY CONTROL <i>(YYYYMMDD)</i> 19990504	
8. DISPOSITION OF ABSENTEE					
a. ACTION BY MILITARY AUTHORITIES <i>(X one)</i>		b. TO <i>(Name of Command in charge of absentee)</i>		c. COST OF TRANSPORTATION <i>(To be charged to the individual's account)</i>	
<input checked="" type="checkbox"/> (1) RETAINED		(2) TRANSFERRED		1st Supply Battalion, 1st FSSG Camp Pendleton, CA 92055	
(3) TECHNICAL ARREST ORDERS		(4) GUARD			
\$ 0.00					
9. REMARKS <i>(Include location of Service, Pay and Health Records)</i> Original service record is missing. Temporary SRB, HR, and DR are held by parent command.					
10. AUTHORIZING OFFICIAL					
a. TYPED NAME <i>(Last, First, Middle Initial)</i> Stevens, Octavia R.		b. GRADE LtCol		c. TITLE Commanding Officer	
d. ORGANIZATION 1st Supply Battalion, 1st FSSG Camp Pendleton, CA 92055		e. SIGNATURE <i>(Sign all copies)</i>			f. DATE SIGNED <i>(YYYYMMDD)</i> 19990506
DD FORM 616, DEC 1999					
PREVIOUS EDITION IS OBSOLETE.					

MCO P5800.16A contains instruction on
How to fill out DD Form 616

CONFINEMENT ORDER			
1. PERSON TO BE CONFINED			2. DATE (YYYYMMDD)
a. NAME (Last, First, Middle)		b. SSN	
c. BRANCH OF SERVICE	d. GRADE	e. MILITARY ORGANIZATION (From):	
TYPE OF CONFINEMENT			
a. PRE-TRIAL <input type="checkbox"/> NO <input type="checkbox"/> YES		b. RESULT OF NJP <input type="checkbox"/> NO <input type="checkbox"/> YES	
c. RESULT OF COURT MARTIAL: <input type="checkbox"/> NO <input type="checkbox"/> YES			
TYPE: <input type="checkbox"/> SCM <input type="checkbox"/> SPCM <input type="checkbox"/> GCM <input type="checkbox"/> VACATED SUSPENSION			
4. OFFENSES/CHARGES OF UCMJ ARTICLES VIOLATED:			
Show offenses in abbreviated form			
5. SENTENCE ADJUDGED:			b. ADJUDGED DATE (YYYYMMDD):
For "pre-trial" blocks 5 and 8 will be left blank.			
6. IF THE SENTENCE IS DEFERRED, THE DATE DEFERMENT IS TERMINATED:			
7. PERSON DIRECTING CONFINEMENT			
a. TYPED NAME, GRADE AND TITLE:		b. SIGNATURE	c. DATE (YYYYMMDD)
d. TIME			
8.a. NAME, GRADE, TITLE OF LEGAL REVIEW AND APPROVAL		b. SIGNATURE:	c. DATE (YYYYMMDD)
For "pre-trial" blocks 5 and 8 will be left blank.			
MEDICAL CERTIFICATE			
9a. The above named inmate was examined by me at _____ on _____ and found to be <input type="checkbox"/> Fit <input type="checkbox"/> Unfit <div style="text-align: center; font-size: small;">(Time) (YYYYMMDD)</div> for confinement. I certify that from this examination the execution of the foregoing sentence to confinement <input type="checkbox"/> will <input type="checkbox"/> will not produce serious injury to the inmate's health.			
b. The following irregularities were noted during the examination (If none, so state):			
c. HIV Test administered on (YYYYMMDD): _____			
d. Pregnancy test administered on (YYYYMMDD): _____ <input type="checkbox"/> N/A			
Medical will Fill out this portion			
10. EXAMINER			
a. TYPED NAME, GRADE AND TITLE:		b. SIGNATURE	c. DATE (YYYYMMDD)
d. TIME			
RECEIPT FOR INMATE			
11.a. THE INMATE NAMED ABOVE HAS BEEN RECEIVED FOR CONFINEMENT AT: _____ <div style="text-align: center; font-size: small;">(Facility Name and Location)</div> ON _____ AND TIME: _____ <div style="text-align: center; font-size: small;">(YYYYMMDD) (Time)</div>			
b. PERSON RECEIPTING FOR INMATE TYPED NAME, GRADE AND TITLE:		c. SIGNATURE:	d. DATE (YYYYMMDD)
e. TIME			

ANNUAL FITNESS REPORT SCHEDULE (AN AND AR REPORTS)

	REPORTING PERIOD ENDS LAST DAY OF	REPORTING PERIOD ENDS LAST DAY OF	REPORTING PERIOD ENDS LAST DAY OF
GRADE OF	ACTIVE COMPONENT	RESERVE COMPONENT	ACTIVE RESERVE
SGT	MAR	SEP	SEP
SSGT	DEC	SEP	SEP
GYSGT	JUN	SEP	SEP
1STSGT/MSGT	JUN	SEP	SEP
SGTMAJ/MGYSGT	SEP	MAY	JUN
WO/CWO	APR	OCT	OCT
2NDLT	JAN/JUL	APR	N/A
1STLT	OCT/APR	OCT	OCT
CAPT	MAY	SEP	JUN
MAJ	MAY	SEP	JUN
LTCOL	MAY	JUN	JUN
COL	MAY	JUL	JUL
BGEN	JUN	JUN	N/A


1. All reports for Marines should arrive at HQMC no later than 30 days after the reporting period to ensure proper processing into official records to facilitate selection board and personnel management decisions.

2. Reservists who are considered for promotion by an Active Component selection board will receive AN reports while those who are considered by a Reserve Component selection board (to include Active Reserve Marines) will receive AR reports.

3. Reports on Active Component 2nd and 1st lieutenants are semiannual vice annual.

4. POC is MMSB-31, Policy and Research Unit at (COM) 703-784-5689/3905/3431 OR (DSN) 278-5689.

MCO P1610.7E is the ref for Fitness Reports

<p>1 ① 2 3 4</p>	 <p>DEPARTMENT OF THE NAVY ② NAME OF ACTIVITY ADDRESS CITY, STATE ZIP +4</p>	<p>1 % 2 1 % 2 From: **Title of activity head, name of activity, location when needed ④ To: ****Title of activity, name of activity, location when needed (Code) Via: *** (1) *Title of activity head, name of activity, location when needed (Code) ***** (2) *Pattern of (1) repeated for next endorser 1 % 1* → Subj: **NORMAL WORD ORDER WITH ALL LETTERS CAPITALIZED ⑥ 1 % 2 Ref: *** (a) *Communication or document that gears directly on the subject at hand } ⑦ 1 % 2 Encl: ** (1) *Title of material enclosed with letter } ⑧ ***** (2) *Title of material separately (sep cover) 1 % 2 1. **This example shows the first page of a two page standard letter. We have used many of the elements that might appear on a standard letter. Mention reference (a) and enclosures (1) and (2) in the text. ⑨ 1 % 2 2. **Start the "From:" line on the second line below the date line. The date may be typed or stamped. % 3. **Arrange paragraphs as shown in figure 2-7 on page 56. 1 % 2 ****a. **Don't start a paragraph at the bottom of the page unless you can carry at least two lines over to the next page. 1 % 2 ****b. **Don't number the first page; number only second and later pages. 1 % 2 ****c. **Other full-page examples in this chapter and later ones show the spacing to use for correspondence that variously omits "Via:," "Ref.," and "Encl:" lines.</p>	<p>SSIC Code/Serial Date } ③</p> <p>} ⑤</p> <p>} ⑦</p> <p>} ⑧</p> <p>← 1" →</p> <p>⑩</p> <p>Minimum of 1"</p>
------------------------------	--	--	---

Note:
* AN ASTERISK (*) INDICATES A SINGLE BLANK SPACE.
% A PERCENT SIGN (%) INDICATES A SINGLE BLANK LINE.

1. Typewriter Lines
2. Letterhead Format (page 11)
3. Identification Symbols (page 33)
4. From Line (page 36)
5. To & Via Lines (page 37)

6. Subject Line (page 38)
7. Reference Line (page 38)
8. Enclosure Line (page 42)
9. Text (page 44)
10. Margins (page 33)

This figure
can be found in

Figure 2-1. Standard Letter – First Page

SECNAVINST
5216.5D
pg 49

29 AUG 1996

1	
2	①
3	
4	
5	
6	② SUBJECT BLOCK
1	%
2	****d.**Second and succeeding pages of a standard letter may look like this:
1	%
2	*****①*Start typing on the sixth line. Repeat the subject line.
1	%
2	*****②*Start the text on the second line below the date or subject line.
	%
← 1" →	4.***"Copy to:" addressees appear on all copies. "Blind copy to:" addressees as well as the identity of the writer and typist appear on internal copies only.
	%
	5.**A standard letter uses no complimentary close.
1	%
2	%
3	%
4	
	NAME OF SIGNER } ③
	By direction
1	%
2	Copy to:
	SNDL number and/or short title of information addressee
	SNDL number and/or short title of 2nd information addressee } ④
1	%
2	Blind Copy to:
	List blind copy addressees } ⑤
1	%
2	Writer: Name, organization, room # or telephone #
	Typist: Name, date, word processing symbols } ⑥
7	

⑦ ↑
⑧

Minimum of 1"

↓

2

- | | |
|---|--|
| 1. Typewriter Lines | 6. Drafter's Identification Block. |
| 2. Subject Line (page 38) | Appears on internal copies only (page 47). |
| 3. Signature Block (page 44). | 7. Margins (page 33) |
| 4. Copy-to Block (page 45) | Page number (page 47) |
| 5. Blind Copy-to Block. Appears only on 8. Internal copies (page 46). | |

Figure 2-2. Standard Letter - Second Page

This figure
can be found in
SECNAVINST

5216.5D

pg 50

29 AUG 1996



DEPARTMENT OF THE NAVY
NAVAL AIR STATION
CECIL FIELD, FL 32215-5000

5216
Ser 11/273
9 Jul 98

From: Commanding Officer, Naval Air Station, Cecil Field
To: Commander in Chief, U.S. Atlantic Fleet
Via: (1) Commander, Sea Based ASW Wings, Atlantic
(2) Commander, Naval Air Force, U.S. Atlantic Fleet

Subj: HOW TO PREPARE ENDORSEMENTS

Encl: (1) Example of New-Page Endorsement

1. An endorsement may be added to the bottom of a basic letter, like this one, or to a previous endorsement if: (a) All of the endorsement will fit on the page, and (b) it is sure to be signed without revision.

C. WORTHY

Ser 019/870
17 Jul 98

FIRST ENDORSEMENT

From: Commander, Sea Based ASW Wings, Atlantic
To: Commander in Chief, U.S. Atlantic Fleet
Via: Commander, Naval Air Force, U.S. Atlantic Fleet

1. A same-page endorsement may omit the SSIC, subject, and the basic letter's identification if the entire page will be photocopied. But these elements are required on all new-page endorsements, such as the one on the next page.

M. R. SAILORS

Copy to: NAS Cecil Field (Code 11)

Figure 2-14. Same-Page Endorsement

This figure
can be found in
SECNAVINST
5216.5D
pg 68

29 AUG 1996



DEPARTMENT OF THE NAVY
 COMMANDER NAVAL AIR FORCE
 UNITED STATES ATLANTIC FLEET
 NORFOLK, VA 23511-5188

5216
 Ser N72/420
 24 Jul 98

SECOND ENDORSEMENT on NAS Cecil Field ltr 5216 Ser 11/273
 of 9 Jul 98

From: Commander, Naval Air Force, U.S. Atlantic Fleet
 To: Commander in Chief, U.S. Atlantic Fleet

Subj: HOW TO PREPARE ENDORSEMENTS

Encl: (2) SECNAVINST 5216.5D

1. Start an endorsement on a new page if all of your endorsement will not fit on the latest communication or your endorsement might not be signed without revision.

2. Number every page and continue the sequence of numbers from the previous communication, as explained in enclosure (2).

3. Every "new page" endorsement must:

- a. Repeat the basic letter's SSIC,
- b. Identify the basic letter in the "endorsement number" line, and
- c. Use the basic letter's subject as its own.

H. H. MILLER
 By direction

Copy to:
 NAS Cecil Field (Code 11)
 *COMSEABASEDASWWINGLANT (Code 019)

*Prior endorser included because second endorsement is significant.

Figure 2-15. New Page Endorsement

This figure
 can be found in

SECNAVINST

5216.5D

pg 69

ADMINISTRATIVE ACTION (5216) NAVMC 10274 (REV. 3-93) (EF) Previous editions will be used SN: 0000-00-003-0904 U/I: PADS OF 100	1. ACTION NO. S-1	2. SSIC/FILE NO. 1336
	3. DATE 20 Aug 00	

4. FROM (Grade, Name, SSN, MOS, or CO, Pers. O., etc.) Staff Sergeant John B. Bushardt 123 45 6789/0369 USMC	5. ORGANIZATION AND STATION (Complete address) PAScol, MCCSSS, Tmg Cmd PSC Box 20041 CamLej 28542-0041
6. VIA (As required) (1) CO, PAScol, MCCSSS (2) CO, MCCSSS (3) CG, Tmg Cmd	

7. TO: <div>Commandant of the Marine Corps (MMEA) Headquarters, United States Marine Corps 3280 Russell Road Quantico, VA 22134-5103</div>	8. NATURE OF ACTION/SUBJECT RE FOR RETENTION ON STA
	9. COPY TO (As required) 1stSgt, PAScol, MCCSSS OR leave blank

10. REFERENCE OR AUTHORITY (if applicable) (a) MCO P1000.6G OR None OR N/A	11. ENCLOSURES (if any) (1) Cert True Copy of BIR/BTR OR None OR N/A
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12. SUPPLEMENTAL INFORMATION (Reduce to minimum wording - type name of originator and sign 3 lines below text)

1. Per the ref, I re retention on Sta through Jul 01.

2. I am submitting the fol info:

a. DCTB: 1 Jul 97

b. OCD: 1 Jul 97

c. ECC: 22 Sep 03

JOHN B. BUSHARDT
OR
J. B. BUSHARDT

13. PROCESSING ACTION. (Complete processing action in item 12 or on reverse. Endorse by rubber stamp where practicable.)

Use enclosure remarks if required

MCO 5216.19 contains step by step instructions
On how to fill out AA Form.

COMMONLY USED ADMIN REFERENCES

Absentee/Deserter/UA:	MCO P5800.16A MCO P1070.12K MCO 5000.14D
Administration Procedures	
Awards/Decorations:	SECNAVINST 1650.1F MCO 1650.19J
Casualty Program:	MCO P3040.4E
Command Issued Directives/Directives Control Point:	MCO 5215.1H
BAS/BAH/FSA:	DODFMR Vol 7A Chap 25-27 MCO P1751.3 MCO 10110.47
Correspondence:	SECNAVINST 5212 5D SECNAVINST 5216.5D SECNAVINST 5210.11D MCO 5210 11D MCO 5216.16B MCO 5216.19
Enlisted Separations:	MCO P1900.16F
Leave:	MCO P1050.3
MOS	MCO P1200.7
Personnel Orders:	MCO P10006.G MCO P1300.8R MCO P1326.6D MCO 4650.30K
Performance Evaluation System:	MCO P1610.7E MCO 1610.11 MCO 1610.15
Promotion/Reduction:	MCO P1400.31B MCO P1400.32C
Retirements/Resignations/Transfer to FMCR:	MCO P1900.16F MCO P1400.31B
Service Records:	MCO P1070.12K MCO P1741.8D MCO P1040.31H
Temporary Additional Duty Orders:	MCO P1000.6G
Travel	MCO P4650.37 NAVS0 P-6034 (JFTR)
Unit Diary:	MCO P1080.40 MCO P1080.20
Request for Legal Service/Unit Punishment Book:	MCO P5800.16A MCM 2004
JAG Manual	
Request Mast:	MCO 1700.23E

MISCELLANEOUS

Marine Corps Reserve Administration	MCO P1001R.1J
Active Duty for Special Work (Reserve)	MCO 1001.59
Marine Admin Messages	MARADMINS
MCTFS Advisory Messages	PAANS, SAANS, TANS
Personnel Admin Advisory Messages	PAA
Uniform Code of Military Justice	UCMJ

PHONE NUMBERS

MANPOWER MANAGEMENT (MM)	703-784-XXXX/DSN 278-XXXX
EVALUATION REVIEW	9205
ENLISTED ASSIGNMENTS	9328
OFFICER ASSIGNMENTS	9284
SUPPORT BRANCH	3934
PROMOTION BRANCH	
ENLISTED	9710
OFFICER	9703
SEPARATIONS & RETIREMENT	9304
MILITARY AWARDS	9206
CASUALTY BRANCH	9580
RESERVE AFFAIRS (RA)	
MANPOWER	9104
CAREER MANAGEMENT TEAM	9127
MARINE FOR LIFE	9104

MCAAT EAST:	910-450-1251/DSN 750-1251
FAX:	910-450-0981/DSN 750-0981

MCAAT WEST	760-725-3085/DSN 361-3085
FAX:	760-725-3117/DSN 361-3117

MISSO-02-Camp Lejeune:	910-451-2708/DSN 751-2708
MISSO-03 Camp Pendleton:	760-725-6982/DSN 365-6982
MISSO-06 Hawaii:	808-257-1334/DSN 457-1334
MISSO-09 District of Columbia:	703-784-9054/DSN 278-9054
MISSO-16/17-Kansas City/Reserve:	816-926-5188/DSN 465-5188
MISSO-27 Okinawa/Japan:	DSN 645-2966/3415

DFAS-Kansas City	800-594-8302
My Pay	800-390-2348/DSN 580-5122
Thrift Savings Plan	877-968-3778

Awards

<https://Inweb1.manpower.usmc.mil/manpower/mm/mm/awardsref.nsf>

Active Duty Retirement System

<http://www.dod.mil/militarypay/retirement/ad/index.html>

ALMARS

<http://www.usmc.mil/almars/almar2000.nsf/almars>

BAH Rate Inquiry

<http://www.dtic.mil/perdiem/bahform.html>

Defense Link

<http://www.defenselink.mil>

DEERS Address Change

<https://www.dmdc.osd.mil/appj/address/index.jsp>

DOD Travel Regs

<http://www.dtic.mil/perdiem/trvlregs.html>

DOD Directives

<http://www.dtic.mil/whs/directives>

DOD Forms

<http://www.dtic.mil/whs/directives/infomgt/forms/formsprogram.htm>

DODFMR

<http://www.dod.mil/comptroller/fmr/>

DTMS

<http://www.missa.manpower.usmc.mil/default.asp?id=92&mnu=92>

Enlisted Assignments

https://Inweb1.manpower.usmc.mil/manpower/mi/mra_ofct.nsf/MMEA/Enlisted%20Assignments%20Branch%20Home

Enlisted Promotions

https://Inweb1.manpower.usmc.mil/manpower/mi/mra_ofct.nsf/MMPR/Enlisted+Promotion+Home

Federal Voting Assistance Program

<http://www.fvap.gov>

Foreign PerDiem Rates

<http://www.state.gov/m/a/als/prdm/>

JAG Manual

<http://neds.nebt.daps.mil/jag/jag.htm>

JFTR

http://141.116.74.201/cgi-bin/om_isapi.dll?clientID=101132&infobase=jftr.nfo&softpage=Browse_Frame_Pg42

Marine Online

<https://www.mol.usmc.mil/System/TFAS/Login.asp>

Marine Corps Home Page

<http://www.usmc.mil>

Marine Corps Units

<http://www.usmc.mil/marinelink/websites.nsf/unitslocation>

Marine For Life Program

<http://www.m4l.usmc.mil/portal/server.pt>

Marine Corps Service Support Schools

<http://www.lejeune.usmc.mil/mccsss/>

Marine Net

<http://www.marinenet.usmc.mil/portal/>

MMSB Home Page

<https://www.mmsb.usmc.mil>

MARADMINS

<http://www.usmc.mil/maradmins/maradmin2000.nsf/maradmins>

MCCAT East

<http://www.lejeune.usmc.mil/mcaat/>

Manpower & Reserve Affairs (MRA)

https://lnweb1.manpower.usmc.mil/manpower/mi/mra_ofct.nsf/m&ra+home

Military Pay and Benefits

<http://www.dod.mil/militarypay/>

MISSA/MISSO Portal

<http://www.missa.manpower.usmc.mil/>

MCI

<https://www.mci.usmc.mil/newmci>

MGIB

<http://www.gibill.va.gov/>

My Pay

<https://mypay.dfas.mil/mypay.aspx>

Navy Directives

<http://neds.nebt.daps.mil/directives/>

Navy Reading Room

http://www.jag.navy.mil/html/reading_room.htm



